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Northern District of	III	Court	uS				Vole	mtary I	Petition
Name of Debtor (if individual, enter Lant, First, Middle):		Name	of Joint De	bter (S	pouse) (Last,	First, Mic	idie):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		AR Ou (includ	her Names de usurried,	used by maider	y the Joint De 1, and trade no	btor in the rucs):	c last 8 years	·	
Last four digits of Soc. Sec./Complete EIN or other Tax LD. No. (if more than one, some all):	r	Last fo	ne all):	r Soc. S	ec/Complete	EIN er o	there Tax I.D.	No. (if =	orc dues
Street Address of Debior (No. & Street, City, and State): 2929 E Hickory Lane Crete, IL		Street A	Address of .	Joint Di	chter (No. &)	Street, Cir	ty, and State)	:	
ZIPODDE (GOY)	7							ZIPCOI	Ж
County of Residence or of the Principal Place of Business:		County	of Reside	nce or e	Ethe Principa	i Place of	Business	<u> </u>	
Mailing Address of Debtor (if different from street address): Same as about		Mailing	g Address o	of Joint	Debtor (if did	Exem fro	m street addr	-s):	
ZIPCODE								ZIPCOL	Æ
Location of Principal Assets of Business Debtac (if different from street a	address al	bove):				***************************************	***************************************		
Type of Delitar (Form of Organization) Nature of Business		T						ZIPCOL	Æ
(Check one beec.) Nature of Business (Check of applicable boxes.))				nikruptcy Car ris Filed: (Ci				
Individual (includes Joiet Debtars) Health Care Baniness. Corporation (includes LLC and LLP) Single Asset Real Estate as defined 12 U.S.C. § 101 (S1B) Rankoad Stockbroker information requested below.)	dia		hapter 7 hapter 9		Chapter 11 Chapter 12 (3		Chapter 15 Pe of a Foreign Ma Chapter 15 Pe of a Foreign No	iss Proceed ticion for R	acognition
State type of cority: Commonlies Backer Clearing Bank Namerolie Organization qualified in	nade:	Ďές	asancoNe		ure of Debts (ocss		ia bas) Basiness		
Full Filing Fee attacked Filing Fee attacked Filing Fee to individuals only)	delinar is	Obeck	one box: der is a sur	all busi	Chapter 11 ness debter ne tusiness debte	defined	in HUSC.		
marble to pay fee except in installments. Rule 1606(b). See Official Form 3A Filing Fee waiver requested (Applicable to chapter 7 individuals only). Most signed application for the court's consideration. See Official Form 3B.		Check Det		gale na s than !	econingent li 12 million	quidated	debts owed s	7 30G-ÜKSÜ	dens ex
Statistical/Administrative Information		<u> </u>			······································		TIME SEACE E	FOR COURT	CER CIVILY
Debtor estimates that finds will be available for distribution to unsecured evol Debtor estimates that, after any exempt property is excluded and administrative distribution to unsecured excluses.		s paid, de	ac will be a	o Grends a	sailable for		G		<u>.</u>
Estimated Number of Creditors 1- 50- 160- 266- 1,006-	5,00	····	(0,001-)	25,091-	50,881-	OVER	Sel HEIMETH		NORTH S
Q D D D SAGO	10,0	100 2	3,000	0000	100,000	100,000	교육	SE	STATES I
Estimated Assets 90 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$500,000 \$100,000 \$1 million	\$16,600 \$50 m),001 to idline	\$50,000,6 \$100 mm		More than \$100 million		CARDNER, P MB	3 0 2009	NITED STATES BANKROFT OF LO
]					-	9	
Estimated Debts							≤2		
00 to 0.000,001 to 1.00,000 to 1.00,000 to 1.00,000 to 0.000 to 0.	\$10,000 \$50 m	-	\$50,000, \$100 ma		More than \$100 million	. 1	CLERK		د. ا
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| Official Form 1) (18/85) | Document Page 2 of 5

Documen	III Page 2 01 5	FORM B1, Page 2
Voluntary Petition	Name of Debior(s):	<i>→</i>
(This page must be completed and filed in every case)		M Jones
Prior Bankruptcy Case Filed Within Last 8 Years ()		
Location Where Filed: Northern District IL	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate Same of Debtor		
Name of Debtor:	Case Number:	Date Filed:
Destrict:	Relationship:	Judge:
Exhibit A	Entel	
(To be completed if debsor is required to file penodic reports (e.g., forms	(To be completed	of dictions as an individual
10K and 10Q) with the Securities and Exchange Commission pursuant to	Whene delets are pr	nimanify constituer éches.
Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting	I, the attorney for the peritioner named in the t	foregoing petition, declare that There informed under claimer 7-11-12 or 13 of title 11 Points
relief under chapter 11.)	States Code, and have explained the relief a	nder ekspier 7, 11, 12, or 13 of title 11, United avsilable under each sach ekspier.
	I further certify that I delivered to the del Bankruptcy Code.	their the notice required by § 342(b) of the
Exhibit A is attached and made a part of this petition.	X	
	Signature of Attorney for Debtor(s)	
Exhibit C		ning Debt Counseling
Does the debtor own or have possession of any property that poses or is	by Individual/	Joint Debtor(s)
adleged to pose a threat of immunent and identifiable harm to public health or safety?	I/we have received approved budget and preceding the filing of this petition.	d credit counseling during the 180-day period
Yes, and Exhibit C is attached and made a part of this petition.	Live request a warver of the requirements to filing based on exigent circumstance	nt to obtain budget and credit counseling prior s. (Must attach certification describing.)
□ №		
	<u> </u>	
	tor (Check the Applicable Boxes)	
Venne (Check any	ry applicable box)	
Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	i place of business, or principal assets in this D is longer part of such 180 days than in any of	estrict for 180 her District.
There is a bankruptcy case concerning debtor's affiliate, ge	racral partacs, or partaciskép pending in deis f	Pistrict.
Debtor is a debtor in a foreign proceeding and lass its pri States in this District, or has no principal place of business or or proceeding [in a federal or state court] in this District, or relief sought in this District.	or assets in the United States but is a defendant	sil isi am action
Statement by a Debtor Who Resides	•	1y
Check all app	licable boxes.	
 Landlord has a judgment against the debtor for possession following.) 	of debtor's residence. (If box checked, compl	lese due
Observe of b		
(Indiana try or	andlerd that obtained judgment)	
(Address of	f laudiord)	
Debtor claims that under applicable aumbankruptcy law, if permitted to cure the entire monetary default that gave rispossession was entered, and	here are circumstances under which the debr se to the judgment for possession, after the j	ior would be judgment for
Debtor has included in this petition the deposit with the co- period after the filing of the petition.	NITL OF any resit that would become due during	g the 30-day

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(Official Form 1) (1845) Document	Page 3 of 5 FORM B1, Page 3
Voluntary Petition	Name of Debuggs ONES. William
(This page must be completed and filed in every case)	JONES. WITHAM
	afures
Signature(s) of Debtar(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjusy that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily constitute debts and has chosen to file under chapter 7.] I am aware that I may proceed under chapter 7. 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no atterney represents me and no bankruptcy petition preparer signs the petition.] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code.	is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am matherized to file this petition. (Check only one box.)
I request relief in accordance with the chapter of title II, United States Code, specified in this petition. D. W. W. M. M. Down Signature of Debior X.	Pussment of \$1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X (Signature of Foreign Representative)
Signature of Joint Debtor 708-672-2480 Telephone Number (If not represented by attorney)	(Printed Name of Foreign Representative)
Defc	Date
Signature of Attorney	Signature of Non-Attorney Bankruptcy Petition Preparer
X Signature of Attorney for Debtor(s) Printed Name of Attorney for Debtor(s) Firm Name Address	I declare under penalty of perjusy that: (1) I am a bankruptcy petition preparer as defined in H U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and afformation required maker H U.S.C. §§ 110(b), 110(b), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to H U.S.C. § 110(b) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section Official Form 19B is attached.
Telephone Number	Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security number (If the bankruptcy petition preparer is not an undividual, state the Social Security number of the officer, pracipal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 116.)
Signature of Debtor (Corporation/Partnerskip) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United.	Address X
States Code, specified in this petition.	Date Signature of Hankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.
Signature of Authorized Individual Prusted Name of Authorized Individual	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the hundruptcy petition preparer is not an individual:
Take of Authorized Individual	If more than one person prepared this document, attack additional sheets conforming to the appropriate official form for each person.
Desic	A bankruptes petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptey Procedure may result in fines or imprisonment or hadr 11 U.S.C. §110; 18 U.S.C. §156.

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Form B6D

(10/05)

Inre William M. Jones	Case No.
Debtor	(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND A ACCOUNT NUMBER (See Instructions Above)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Strantree Labor Stratu St. Strant MASSION	X		Mortgage VALUE \$160,000.			X	みい,000 00	52,000.00
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.								
continuation sheets attached			VALUE \$ Subtotal ► (Total of this page) Total ► (Use only on last page)	1			\$ 212,000 00	7

